



## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 4116

|                             |                                   |              |                        |                                     |
|-----------------------------|-----------------------------------|--------------|------------------------|-------------------------------------|
| SERIAL NUMBER<br>09/777,876 | FILING DATE<br>02/07/2001<br>RULE | CLASS<br>375 | GROUP ART UNIT<br>2631 | ATTORNEY<br>DOCKET NO.<br>202888US2 |
|-----------------------------|-----------------------------------|--------------|------------------------|-------------------------------------|

## APPLICANTS

Arnaud Gueguen, Rennes, FRANCE;

## \*\* CONTINUING DATA

NONE PD

## \*\* FOREIGN APPLICATIONS

FRANCE 0001984 02/14/2000 PD

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 04/25/2001

|                                 |   |                  |                |              |                    |
|---------------------------------|---|------------------|----------------|--------------|--------------------|
| Foreign Priority claimed        | <input checked="" type="checkbox"/> yes <input type="checkbox"/> no   | STATE OR COUNTRY | SHEETS DRAWING | TOTAL CLAIMS | INDEPENDENT CLAIMS |
| 35 USC 119 (a-d) conditions met | <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>Allowance | FRANCE           | 4              | 28           | 1                  |
| Verified and Acknowledged       | Examiner's Signature<br>PD  | Initials         |                |              |                    |

## ADDRESS

22850

## TITLE

Digital transmission method of the error correcting coding type

|                             |   |   |
|-----------------------------|---|---|
| FILING FEE RECEIVED<br>1254 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
|-----------------------------|---|---|